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FACSIMILE COVER SHEET

DATE: **July 12, 2005**
 TO: **Examiner AKLILU, Kirubel** FAX NO.: **703-872-9306**
USPTO - GAU 2614
 FROM: **Adam D. Sheehan / *WAS***
Reg. No. 42,146
 RE: **REPLY TO NON-FINAL OFFICE ACTION**

U.S. APP NO.: **09/871,917**

FILING DATE: **06/01/2001**

APPLICANT(S): **Anton V. KOMAR**

ATTY DKT NO.: **1376-0100530**

TITLE: **SYSTEM AND COMPUTER READABLE MEDIUM FOR
ACCESSING PROGRAM CONTENT INFORMATION AND
METHOD THEREOF**

NO. OF PAGES (INCL. COVER SHEET): **12**

MESSAGE:

Attached please find:

- PTO/SB/21 Transmittal Form (1 pg.)
- Reply to Non-Final Office Action (9 pgs.)
- PTO/SB/22 Petition for Extension of Time (1 pg.)

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PTO/SB/21 (09-04)

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FORM**

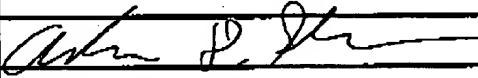
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Total Number of Pages in This Submission

11

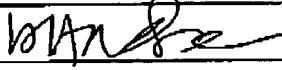
Application Number	09/671,917
Filing Date	06/01/2001
First Named Inventor	Anton V. KOMAR
Art Unit	2614
Examiner Name	AKLILU, Kirubel
Attorney Docket Number	1376-0100530

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmitted Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.62 or 1.53	<input type="checkbox"/> Drawing(s) Replacement Sheets 1, 6 <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	TOLER, LARSON & ABEL, LLP	
Signature		
Printed name	Adam D. Sheehan	
Date	7/12/05	Reg. No. 42,146

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Date 07/12/2005

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